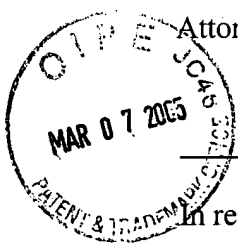


AF 12/11



Attorney Docket # 5403-2RCE

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Stefan Lukas et al.

Serial No.: 09/177,427

Filed: October 22, 1998

For: Taste Masked Pharmaceutical Compositions

Examiner: G. W. Mitchell  
Group Art: 1617

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on  
March 3, 2005  
(Date of Deposit)

Vincent M. Fazzari

Name of applicant, assignee or Registered Representative

*Vincent M. Fazzari*  
Signature

March 3, 2005

Date of Signature

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

NOTICE OF APPEAL FROM THE PRIMARY EXAMINER  
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

S I R:

Applicant(s) hereby appeal(s) to the Board of Patent Appeals and Interferences from the decision dated October 4, 2004 of the Primary Examiner twice or finally rejecting claims 16-30.

The items checked below are appropriate:

1. ☒ The time for response to the Office Action of October 4, 2004 expires on March 4, 2005.
2. ☐ A \_-month extension of time for response to the Office Action dated \_ was filed on . [No additional extensions of time are required.]
- 3a. ☒ Applicant(s) hereby request(s) a two-month extension of the original shortened statutory response period set in the Office Action of October 4, 2004. Payment in the amount of \$450.00 of the government fee for an extension of time is enclosed herewith.

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02 FC:1252

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- 3b. ☐ This is not the first request for an extension of time relative to the outstanding paper. The period for response has already been extended by -month(s) by petition dated . Please extend the time for response by an additional -month(s). With this extension, the deadline for filing the required paper will be . Payment for the additional extension fee of \$ is enclosed.
4. ☒ Check for payment of the appeal fee of \$950.00 and any other fee applicable  
☒ is enclosed herewith.  
☐ No additional fee is required (fee paid in prior appeal).  
☐ Charge the fee to Deposit Account No. 03-2412 (one additional copy of this Notice is enclosed herewith).
5. ☒ Charge any additional fees required, for example, for lodging this appeal or for filing the Appeal Brief, not otherwise paid by check, to Deposit Account No. 03-2412. A duplicate copy of this sheet is enclosed.

Respectfully submitted,  
COHEN, PONTANI, LIEBERMAN & PAVANE

By

  
\_\_\_\_\_  
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Dated: March 3, 2005